2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000083099

Entity Name: CASSAGNOL DESIGN, INC.

FILED Feb 02, 2006 Secretary of State

Current Principal Place of Business: New P	incipal Place of Business:
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1310 MONAD TERRACE 12860 NE 10TH AVE. SUITE 4 NORTH MIAMI, FL 33161

MIAMI BEACH, FL 33139

Current Mailing Address: New Mailing Address:

1310 MONAD TERRACE 12860 NE 10TH AVE. SUITE 4 NORTH MIAMI, FL 33161 MIAMI BEACH, FL 33139

FEI Number: 59-3808140 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MARDER, MARK A 9400 SO. DADELAND BLVD. PH-5 MIAMI, FL 33156 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD () Delete Title: PTD (X) Change () Addition Name: CASSAGNOL, RALPH Name: CASSAGNOL, RALPH

 Address:
 1310 MONAD TERRACE, STE 4
 Address:
 12860 NE 10TH AVE.

 City-St-Zip:
 MIAMI BEACH, FL 3139
 City-St-Zip:
 NORTH MIAMI, FL 33161

Title: VPSD () Delete Title: VPSD (X) Change () Addition
Name: BELIZAIRE REYNALD
Name: BELIZAIRE REYNALD

 Name:
 BELIZAIRE, REYNALD
 Name:
 BELIZAIRE, REYNALD

 Address:
 1310 MONAD TERRACE, STE 4
 Address:
 12860 NE 10TH AVE.

 City-St-Zip:
 MIAMI BEACH, FL 33139
 City-St-Zip:
 NORTH MIAMI, FL 33139

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: REYNALD BELIZAIRE VPSD 02/02/2006